

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107158

FILED  
Mar 26, 2004  
Secretary of State

Entity Name: LAND SHAPERS, INC.

**Current Principal Place of Business:**

4126 SW 8 COURT  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

4126 SW 8 COURT  
CAPE CORAL, FL 33914

**New Mailing Address:**

FEI Number: 01-0565590      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

EKSTROM, KARYN  
4126 SW 8 COURT  
CAPE CORAL, FL 33914      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: EKSTROM, KARYN  
Address: 4126 SW 8 COURT  
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete  
Name: EKSTROM, ERIC  
Address: 4126 SW 8 COURT  
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete  
Name: STEELE, ANA  
Address: 1217 SW 18 STREET  
City-St-Zip: CAPE CORAL, FL 33991

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MRS. (X) Change ( ) Addition  
Name: EKSTROM, KARYN  
Address: 4126 SW 8 COURT  
City-St-Zip: CAPE CORAL, FL 33914

Title: MR. (X) Change ( ) Addition  
Name: EKSTROM, ERIC J  
Address: 4126 SW 8 COURT  
City-St-Zip: CAPE CORAL, FL 33914

Title: MRS. (X) Change ( ) Addition  
Name: STEELE, ANAMAURY  
Address: 1513 SW 49 STREET  
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARYN EKSTROM

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

MRS.

03/26/2004

\_\_\_\_\_ Date